								Application or Docket Number					
P	ATENT AF	PPLICATION Effect	I FEE DE	RD	<	81	1	12	5				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL E	ENTITY	OR _	OTHER SMALL E			
FOR	1111				NUMBER EXTRA		RATE	FEE		RATE	FEE		
								385.00	OR		770.00		
BASIC FEE		11	minus 20 =				¢\$11=			x\$22=			
TOTAL CLAIMS INDEPENDENT CLAIMS		MS	1	*		-			~`` 	x80=	20		
			minus	3 =		-	x40=		OR		00		
MULTIPLE DEPENDENT CLAIM PRESENT						Ľ	⊦130=		OR	+260=	1		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	55°L		
		CLAIMS AS A	IMS AS AMENDED - PART		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**	=		x\$11=		OR	x\$22=			
	Independent	*	Minus	***	=		x40=		OR	x80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130=		OR	+260=			
	(Column 1) (Column 2) (Column 3)						TOTAL ODIT. FEE		OR ,	TOTAL ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**	=		x\$11=		OR	x\$22=			
	Independent	*	Minus	***	=		x40=		OR	x80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130=		OR	+260=			
	(Column 1) (Column 2) (Column 3)						TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**	=		x\$11=		OR	x\$22=			
	Independen	t *	Minus	***	=		x40=		OR	x80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130=	:	OR	+260=			
**	the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."						TOTA ADDIT. FE	Ε	OF	ADDII. I L			
***	If the "Highest N The "Highest Nu	umber Previously F mber Previously Pa	Paid For" IN TI aid For" (Total	HIS SPACE is less th or Independent) is th	an 3, enter "3." e highest number	found	in the app	oropriate box i	n colum	n 1.			

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